	<b>Absolute Priority:</b>	State Personnel Development Grants Program			
	Organization:				
	Project Title:				
	Start Date:				
	End Date:				
Project Director:					
	Full Name:				
	Address Line 1:				
	Address Line 2:				
	City:				
	State:				
	Zip Code:				
	Telephone:				
	<b>Email Address:</b>				
	Average Time on Project, Year 1 (%):				

## Additional Key Personnel (not including project director listed above):

Full Name	Position on Project	Average Time on Project, Year 1 (%)

	cribe the purpose and expected outcomes of the project.  ds or fewer)
Briefly des include:	scribe the professional development that the project will provide, to
(a) The a	activities;
(b) The ו	population that will receive the professional development; and
(c) The	evaluation of the project's performance. (100 words or fewer)